



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9408

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|---|
| SERIAL NUMBER 10/687,244 | FILING OR 371(c) DATE 10/16/2003 RULE | CLASS 719 | GROUP ART UNIT 2194 | ATTORNEY DOCKET NO. A2485-US-NP XERZ 2 01275 |
|------------------------------------|---|---------------------|-------------------------------|---|

APPLICANTS

Naveen Sharma, Perinton, NY;
 Michael R. Furst, Rochester, NY;
 Claude S. Fillion, Rochester, NY;
 Weixia Huang, Rochester, NY;
 Michael P. Kehoe, Rochester, NY;
 Arturo M. Lorenzo, Fairport, NY;
 Mary C. McCorkindale, Fairport, NY;
 Robert J. St. Jacques, Fairport, NY;
 Tracy E. Thieret, Webster, NY;
 John C. Austin, Philadelphia, PA;
 Marc D. Daniels, Pittsford, NY;
 Michael F. Cavanaugh, Webster, NY;

** CONTINUING DATA *****

This appln claims benefit of 60/319,622 10/16/2002 and claims benefit of 60/319,623 10/17/2002 *verified NP*
 and claims benefit of 60/319,624 10/17/2002 *verified NP*
 and claims benefit of 60/319,625 10/17/2002 *No*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

01/20/2004

| | | | | |
|---|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY NY | SHEETS DRAWING 19 | TOTAL CLAIMS 21 | INDEPENDENT CLAIMS 2 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <u> </u> Examiner's Signature <i>NP</i> Initials | | | | |

ADDRESS

Patrick R. Roche
 FAY, SHARPE, FAGAN, MINNICH & McKEE, LLP
 Seventh Floor
 1100 Superior Avenue
 Cleveland, OH 44114-2579

TITLE

Device model agent

| | | |
|---------------------------------------|---|---|
| FILING FEE RECEIVED 918 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|---------------------------------------|---|---|